

# Kentucky Diabetes Connection



The Communication Tool for Kentucky Diabetes News

## AACE

American Association of  
Clinical Endocrinologists  
Ohio River Regional Chapter

## ADA

American Diabetes  
Association

## DECA

Diabetes Educators  
Cincinnati Area

## GLADE

Greater Louisville Association  
of Diabetes Educators

## JDRF

Juvenile Diabetes Research  
Foundation International

## KADE

Kentucky Association of  
Diabetes Educators

## KEC

Kentuckiana Endocrine Club

## KDN

Kentucky Diabetes  
Network, Inc.

## KDPCP

Kentucky Diabetes Prevention  
and Control Program

## TRADE

Tri-State Association of  
Diabetes Educators

## A Message from Kentucky Diabetes Partners

### STATE MONEY REALLOCATED FOR KY DIABETES EFFORTS!

*Submitted by: Teresa McGeeney, KY Diabetes  
Network Advocacy Committee*

On February 6, 2014, diabetes advocates from across the state traveled to Frankfort to speak with legislators about the toll diabetes is taking on Kentuckians. Advocates shared their personal stories about how diabetes has affected them, as well as the hard facts – one in ten Kentuckians has diabetes and the rate is skyrocketing faster than almost any other state in the country.

Funds used to be designated in the state budget for diabetes prevention and control efforts on a local level, but since 2012, that money was no

longer designated specifically for diabetes. Without a concrete statewide effort supported by funds to address diabetes, educational opportunities became more limited, as the diabetes rates continued to rise at an exponential rate.

The legislators with whom KDN members spoke to, expressed surprise and concern upon learning that there was no longer money set aside for diabetes efforts amidst the urgent epidemic facing Kentucky. After individual meetings with legislators and a testimony to the Budget Review Subcommittee on



*KDN member Teresa McGeeney, left, and Representative Mary Lou Marzian, right, discuss the importance of diabetes education and services at the 2014 Diabetes Day at the Capitol.*

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**CDC'S NATIONAL DIABETES STATISTICS REPORT, 2014 P. 3 AND MORE!**

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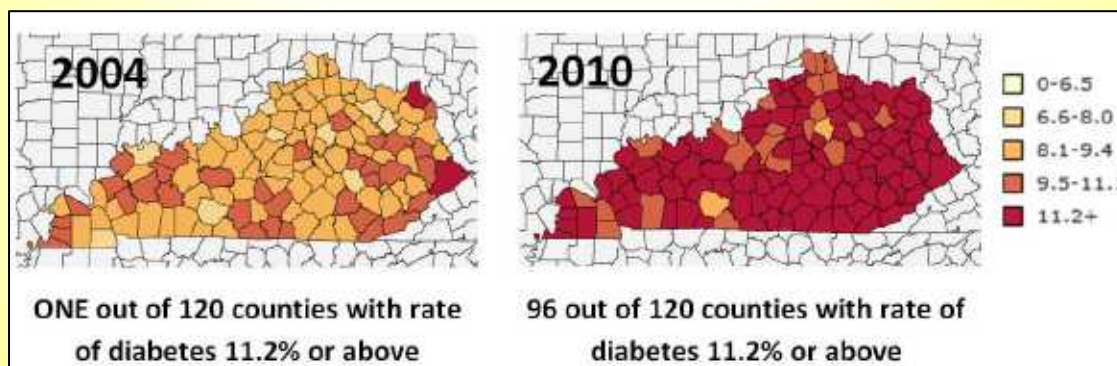
Human Resources about the importance of funds for diabetes services, **the final budget was passed with \$2.6 million dollars designated to support diabetes efforts through local and district health departments.**

Representative Mary Lou Marzian, who serves on the Budget Review Subcommittee on Human Resources, worked to re-designate these funds in the budget and explained her support saying, *"Funding for diabetes education and services is critical for the citizens of Kentucky. It will enable folks to live healthier happier lives by learning how to prevent, manage, and live with diabetes. Education is key to giving people the tools to learn the importance of controlling diabetes."*

Another advocacy victory as a result of KDN meetings

with legislators was an effort led by Representative John Will Stacy to include \$500,000 in the state budget to introduce diabetes education in Kentucky's public school system in collaboration with the Department of Agriculture's existing nutrition education program in the schools. Though these funds did not make it into the final version of the budget, the collaboration between Representative Stacy and KDN members was innovative and impressive. It is this type of creative thinking and collaboration shown from citizens and legislators on **Diabetes Day at the Capitol** that will help pave the way for a healthier Kentucky.

Thank you to all the advocates who were present at the **2014 Diabetes Day at the Capitol**, and those who called or wrote to their legislators to make their voice heard!



Pictorials, above, taken from the CDC Diabetes Atlas, were used in legislative meetings to show KY diabetes prevalence rates by county 2004 versus 2010.

## DIABETES CARE IN KENTUCKY SCHOOLS

*Submitted by: Gary Dougherty, Associate Director, State Government Affairs for the American Diabetes Association (ADA)*

On March 5th, Governor Beshear signed HB 98 into law. This "Safe at School" law, an American Diabetes Association (ADA) priority, allows unlicensed school personnel to volunteer to be trained to provide basic diabetes care, including administering insulin and glucagon, to children with diabetes in Kentucky schools. The bill also allowed children, if

they are capable, to self-manage their diabetes while at school.

Thanks go to Representative Damron and Senator Julie Denton, the Kentucky School Boards Association, the Kentucky Diabetes Network, Kentucky Protection and Advocacy, and many other supporters and allies.

ADA looks forward to the opportunity to work with the KY Department of Education to provide as much clarity as possible among parents and schools regarding the new law to ensure that school is a safe place for all Kentucky school children living with diabetes.



Gary Dougherty

*On April 15th, Governor Beshear hosted a number of advocates in his office for a ceremonial signing of the new law (HB 98).*

*Joining the Governor (photo on right) were many legislators, including the primary sponsor of the bill, Rep. Bob Damron, several ADA staff and volunteers, Kentucky School Boards Association staff, as well as families of children with diabetes.*





# CDC's *NATIONAL DIABETES STATISTICS REPORT, 2014*

## NOW AVAILABLE



Ann Albright  
CDC  
Diabetes Translation  
Director

*Submitted by: Ann Albright, PhD, RD, Director of the Division of Diabetes Translation, Centers for Disease Control and Prevention*

**It's official! I'm thrilled to announce that our *National Diabetes Statistics Report, 2014* was recently released!**

This **Report** presents the most current information on diabetes and prediabetes in the U.S. among people of all ages and ethnicities.

### Highlights include:

- More than 29 million people in the U.S. have diabetes, up from the previous estimate of 26 million in 2010. One in four people with diabetes doesn't know he or she has it.
- Another 86 million adults — more than one in three adults — have prediabetes. Without weight loss and moderate physical activity, 15 to 30 percent of people with prediabetes will develop type 2 diabetes within five years.
- 1.7 million people aged 20 years or older were newly diagnosed with diabetes in 2012.
- Non-Hispanic black, Hispanic, and American Indian/Alaska Native adults are about twice as likely to have diagnosed diabetes as non-Hispanic white adults.
- 208,000 people younger than 20 years have been diagnosed with diabetes (type 1 or type 2).
- The percentage of U.S. adults with prediabetes is similar for non-Hispanic whites (35 percent), non-Hispanic blacks (39 percent), and Hispanics (38 percent).

Our internal CDC teams have been hard at work creating messages and materials to promote the **Report** and get the information to the people who need it most. These communications products include:

- National Diabetes Statistics Page
- Diabetes Media Press Kit
- Infographics on diabetes and prediabetes statistics
- Social media posts on Facebook (CDC), Twitter (@CDCgov, @CDCChronic, @Dr.FriedenCDC, @CDC\_eHealth), Google+, LinkedIn and Pinterest.

Please help promote the **Report** by sharing this information with your colleagues and any other individuals and organizations who may be interested in these important statistics. Follow the online conversation on CDC's social media pages — and share and re-Tweet the messages sent out through CDC's Chronic and CDC-wide accounts.

The information in this **Report** underscores the importance of the diabetes prevention and control work done every day across our nation. I look forward to our continued work together with our partner agencies and organizations as we strengthen our resolve to help decrease the burden of diabetes in the U.S.

**Best regards,  
Ann**



**Download the  
National Diabetes Statistics Report, 2014  
[http://www.cdc.gov/diabetes/pubs/  
statsreport14.htm](http://www.cdc.gov/diabetes/pubs/statsreport14.htm)**



# KY DIABETES EDUCATORS Go To WASHINGTON



*Submitted by: Maggie Beville, RN, BSN, CDE, MLDE, AADE Kentucky Coordinating Body (CB), Advocacy State Grassroots Coordinator*

On May 19-20, 2014, the American Association of Diabetes Educators (AADE) Public Policy Forum was held in Washington D.C. and included over 100 visits with members of Congress to ask for support for the *Access to Quality Diabetes Education Acts, H.R. 1274 and S. 945*

**NOTE:** *H.R. 1274 and S. 945 advocates for credentialed Diabetes Educators — meaning Certified Diabetes Educators (CDE), Board Certified in Advanced Management (BC-ADM), or Licensed Diabetes Educators (LDE) — to be recognized as Medicare providers of diabetes self-management education / training.*

AADE Kentucky Coordinating Body (KY CB) members, Betty Bryan and Maggie Beville, were two of approximately 50 diabetes educators who stormed Capitol Hill, attended the Forum in person, and met with U.S. Congressmen. Many other diabetes educators also participated in the Public Policy Forum “virtually” by tweeting, emailing and calling their national legislators.

**Kentucky U.S. Congressman Ed Whitfield originally introduced H.R. 1274 on 03/19/2013 and as of**



*Kentucky's Coordinating Body (CB) of AADE sent members to Washington to meet with KY legislators regarding HR 1274 and S 945. Pictured above, left to right, are Betty Bryan, Congressman Brett Guthrie, and Maggie Beville*

**06/09/2014, the Bill has 14 Co-Sponsors.** Maggie, and Betty met with staff from Senators Mitch McConnell and Rand Paul's offices to discuss the benefits of Diabetes Self Management Education (DSME) and the role of the Credentialed Diabetes Educator.

**Maggie and Betty also met with Representative Brett Guthrie who continues to be a co-sponsor of H. R. 1274, the Access to Quality Diabetes Education Act.**

**We send heartfelt thanks to all the wonderful legislators who co-sponsored this Bill and ask you to encourage your Congressmen and women to also jump on board.**

**If you would like to send your member of Congress a message to support H.R 1274 / S. 945, The Access to Quality Diabetes Education Acts go to:**

**<https://secure2.convio.net/aade/site/Advocacy?cmd=display&page=UserAction&id=140>**

If you have any questions regarding any of AADE's legislative efforts, please contact:  
**[advocacy@aadenet.org](mailto:advocacy@aadenet.org)**





# LICENSURE FOR DIABETES EDUCATORS — DIFFERENT STATES. DIFFERENT PROCESSES. ALL POSITIVE OUTCOMES.



*Submitted by: Charles J. Macfarlane, FACHE, CAE, Chief Executive Officer, American Association of Diabetes Educators (AADE)*

First, I wanted to take a moment to express the American Association of Diabetes Educators' (AADE) appreciation for all of the work the educators and stakeholders have done in shaping the licensure regulations in the state of Kentucky. It is

challenging work trying to ensure both the process and the requirements meets everyone's needs.

I also wanted to provide additional perspective regarding the article that AADE submitted in the April 2014 KDN newsletter. Individuals may have walked away with the impression that AADE was being critical of the Kentucky licensure process and/or the licensure board. On the contrary, we fully support the difficult decisions that have been made and commend all of the parties involved for creating quality regulations and continuing to adjust the

language and requirements as needed. This includes the Kentucky Board of Licensed Diabetes Educators; the Kentucky Coordinating Body; representatives from the Attorney General's office and individual educators and stakeholders across the state. Kentucky is pioneering the way for the licensure of diabetes educators and as would be expected it has been and continues to be a learning process.

With a second state passing licensure legislation, Indiana now offers a new perspective on the regulatory process as their approach is different than that of Kentucky. It allows AADE to be involved in the creation of the regulations in ways were not available in Kentucky simply due to the process and structure that is unique to the state. It's a different state with different processes.

Thank you again for all of your work and if you have any questions regarding this effort or AADE's position, please contact James Specker, Director, Federal and State Advocacy at AADE at [advocacy@addenet.org](mailto:advocacy@addenet.org).

## AADE MEMBERS ELECT NEW NATIONAL 2015 LEADERS

### President-elect:

**Hope Warshaw, MMSc, RD, CDE, BC-ADM**

Hope Warshaw Associates, LLC  
Owner  
Alexandria, VA

### Treasurer:

**Karen Kemmis, PT, DPT, MS, GCS, CDE**

Joslin Diabetes Center Affiliate at SUNY Upstate Medical University  
Physical Therapist/Diabetes Educator  
Syracuse, NY

### New Members of the Board

**Constance Brown-Riggs, MEd, RD, CDE, CDN**

CBR Nutrition Enterprises  
Owner  
Massapequa, NY

**Donna Funk, RN, BSN, MAEd, NP, CDE, BC-ADM**

Borgess Medical Center  
Diabetes Clinical Nurse Specialist  
Kalamazoo, MI

**Jasmine Gonzalvo, PharmD, BCPS, BC-ADM, CDE**

Purdue University  
Clinical Associate Professor/Clinical Pharmacy Specialist, Ambulatory Care  
Indianapolis, IN

**Joanne Rinker, MS, RD, CDE, LDN**

NC DHHS  
Director of Training and Technical Assistance for the Center for Healthy North Carolina  
Raleigh, NC

### Nominating Committee

**Barb Schreiner, PhD, APRN, CDE, BC-ADM, CPLP**

Elsevier, Inc.  
Director of Research  
Houston, TX

**Janine Freeman, RD, LD, CDE, CDTC**

Emory Healthcare and Janine Freeman Associates, LLC  
Diabetes Nutrition Specialist  
Atlanta, GA

**Christine Tobin, MSN, MBA, CDE**

Self-Employed  
Diabetes Educator  
Atlanta, GA

**Donna Tomky, MSN, RN, C-NP, CDE, FAADE**

ABQ Health Partners  
Nurse Practitioner/Diabetes Educator  
Albuquerque, NM

**NEW BEGINNINGS  
DISCUSSION GUIDE  
AVAILABLE FREE**

**The National Diabetes Education Program (NDEP) recently announced the availability of a new diabetes discussion guide which may be downloaded for free. The discussion guide called, *New Beginnings*, may be used to help teach adults with diabetes skills for managing the emotional side of the disease and building helpful relationships with the people who support them. It was developed for diabetes educators, health educators, community health workers and others who provide diabetes education and support to address important skills such as:**

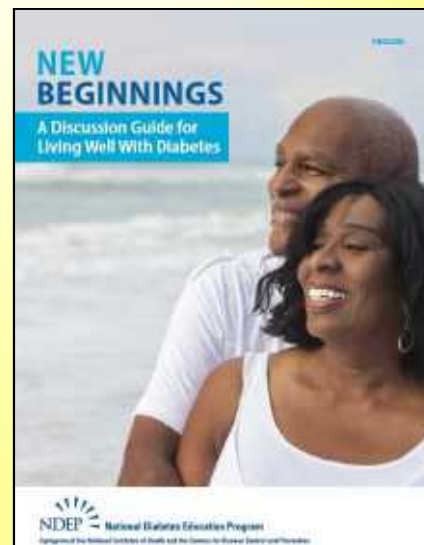
- Goal setting
- Managing stress
- Problem solving
- Overcoming self-doubt
- Communicating with family members and health care providers

- New Beginnings* uses stories of people with diabetes and their families to help participants talk about the challenges of living with the disease, while skill building activities to support behavior change. You can add *New Beginnings* discussions to existing diabetes education and support groups, or use the guide to create discussion groups focused on emotional health for people with diabetes and their families.

The audio program, *Managing the Emotional Impact of Diabetes*, is an introduction to the issues addressed by *New Beginnings*. This program is in the process of being approved for continuing education credit.

**Download the  
New Beginnings  
discussion guide,  
worksheets and  
forms at:**

<http://www.cdc.gov/diabetes/ndep/new-beginnings.htm>



# DELEGATION OF INSULIN ADMINISTRATION IN SCHOOLS

## *NEW TRAINING MANUAL NOW AVAILABLE*



*Submitted by: Pamela C. Hagan, MSN, RN,  
APRN Education and Practice Consultant,  
KY Board of Nursing*

During the last legislative session, a bill (HB 98) was introduced which addressed the delegation of medication administration in a school setting. While there have been laws in place pertaining to medication administration by unlicensed persons

in the school setting for some time — this bill included adding insulin administration as a task that may be delegated to unlicensed personnel by registered nurses. This bill passed and was signed into law by Governor Beshear. It is effective as of the 2014-2015 school year.

In response to this legislation the Board initially developed a proposed new regulation that would have specifically addressed the delegation of insulin administration in school settings. Upon review, however, the Board determined that the current regulation 201 KAR 20:400 “Delegation of nursing tasks” sufficiently addresses the delegation of nursing tasks regardless of type of task or setting. Subsequently, the Board withdrew the proposed new regulation addressing insulin administration from the administrative review process.

The change in law mandates that all unlicensed persons to whom the task of insulin administration in the school setting may be delegated, must receive training consistent with training programs and guidelines of the American Diabetes Association. To that end, the Board determined that the ***KBN Insulin Administration in School Settings Training Program Manual*** and accompanying training materials would be made available on the KBN website for anyone who wishes to use them in training both licensed and unlicensed personnel.

The Kentucky School Nurses Association (KSNA) will be utilizing the Board’s training materials and providing training for school nurses on delegation of insulin administration in schools at its KSNA Summer Conference, July 28-29, 2014.

For more information, please contact:

Pamela C. Hagan

Kentucky Board of Nursing (KBN)

APRN Education and Practice Consultant

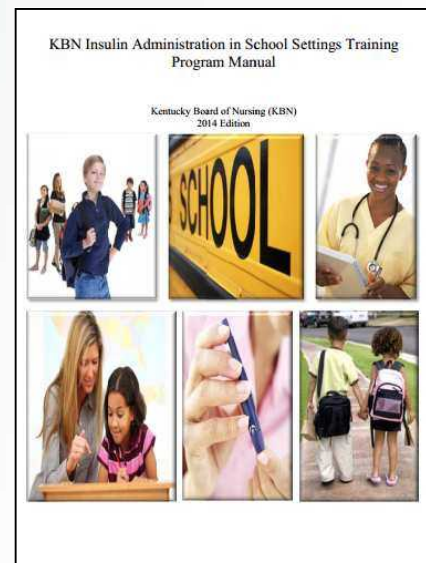
[pamelac.hagan@ky.gov](mailto:pamelac.hagan@ky.gov) , 502-429-7181.

**The NEW KY Board of Nursing  
Insulin Training Manual  
may be downloaded at:**

**[http://www.kbn.ky.gov/practice/  
insulinadmin.htm](http://www.kbn.ky.gov/practice/insulinadmin.htm)**

### **KBN Insulin Training Manual Includes Sections:**

- **Diabetes in Kentucky Schools**
- **Diabetes Basics**
- **Diabetes Medical Management Plan (DMMP)**
- **Individualized Health Plans (IHPs) for Students**
- **Hypoglycemia**
- **Glucagon Administration, part 1**
- **Glucagon Administration, part 2**
- **Glucagon Administration, part 3**
- **Hyperglycemia**
- **Ketones**
- **Carb Counting**
- **Blood Glucose Monitoring**
- **Insulin Administration**
- **Storage and Disposal**



**KENTUCKY BOARD OF NURSING**



# TANZEUM APPROVED FOR TYPE 2 DIABETES



Carrie Isaacs  
PharmD, CDE

Submitted by Carrie Isaacs, Pharm D, University of Kentucky, Lexington, KY

## Tanzeum FDA Approval

In mid-April, the U.S. Food and Drug Administration (FDA) approved GlaxoSmithKline's (GSK) Tanzeum injection for treating adults with type 2 diabetes. GSK anticipates the launch of Tanzeum in the third quarter of 2014.

The once-weekly drug, generically known as albiglutide, was approved in Europe in March, where it will be marketed as Eperzan. Analysts expect the drug to hit \$430 million in sales by 2018, according to Thomson Reuters data.

## Class

Tanzeum (albiglutide) is a glucagon-like peptide-1 (GLP-1) receptor agonist, a hormone that helps regulate blood glucose. Thus it belongs to the same class of GLP-1 drugs as Victoza (liraglutide) from Novo Nordisk and Byetta (exetanide) and Bydureon (exenatide extended release) from AstraZeneca.

Tanzeum "can be used alone or added to existing treatment regimens to control blood sugar levels in the overall management of diabetes," Dr. Curtis Rosebraugh, director of the Office of Drug Evaluation II in the FDA's Center for Drug Evaluation and Research, said in an agency news release.

## Clinical Trials

The FDA's approval of the drug, Tanzeum, was based on eight clinical trials that included more than 2,000 people with type 2 diabetes. The drug has been studied for use in combination with other diabetes medications such as metformin, glimepiride, pioglitazone and basal insulin.

## Dosage

Tanzeum's once weekly subcutaneous injection will be administered via an injector pen supplied with a 5 mm 29-gauge thin-walled needle. The starting dose of Tanzeum is 30mg SC once weekly. The dose may be increased to 50 mg once weekly if glycemic response is not adequate.

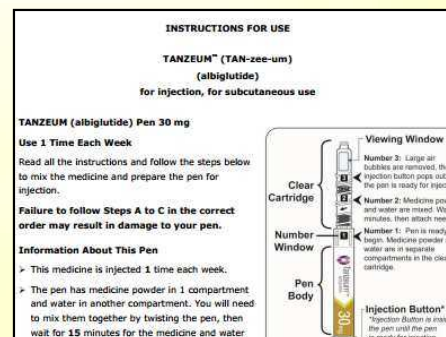
Tanzeum will be available in 30mg single-dose pens and 50 mg single-dose pens and sold in cartons containing one or four pens. If Tanzeum is being initiated with insulin secretagogues (e.g. a sulfonylurea or a basal insulin) already on board, consider reduction in the dose of either or both of those insulin secretagogue products to reduce risk of hypoglycemia. Tanzeum, like the other GLP-1 agonists, can be administered in the abdomen, thigh or upper arm and can be administered any time of day without regard to meals.

## Side Effects / Precautions

The most common side effects of Tanzeum's use ( $\geq 10\%$ ) were diarrhea, nausea and injection-site reactions. The drug's label will include a boxed warning stating that the use of some GLP-1 receptor agonists have been associated with thyroid tumors in rodents. It should not be prescribed for patients with a personal or family history of a type of thyroid cancer called medullary thyroid carcinoma (MTC), or for patients with Multiple Endocrine Neoplasia syndrome type 2. Patients with this disease have tumors in more than one gland in their body and are at increased risk for MTC. Also, Tanzeum has not been studied in the following populations: those with a history of pancreatitis, those with severe pre-existing gastrointestinal disease and in those using prandial insulin.

## More Clinical Trials Required

The FDA is requiring several post-approval clinical trials to evaluate the drug's possible link to thyroid tumors, its effectiveness among children and any risks to the cardiovascular system. It is not to be used by people with type 1 diabetes.



Instructions For Use May Be Downloaded :

<http://us.gsk.com/html/media-news/press-kit/Tanzeum/Tanzeum%20PI-MG-IFU%20Combined.pdf>



# NATIONAL CERTIFICATION BOARD FOR DIABETES EDUCATORS (NCBDE): *INITIAL ELIGIBILITY REQUIREMENT CHANGES*

In its most recent Spring / Summer 2014 Newsletter issue, the National Certification Board for Diabetes Educators (NCBDE) outlined three changes that are effective in 2014 that relate to the requirements for initial certification as a Certified Diabetes Educator (CDE).

## Master Certified Health Education Specialist (MCHES) Added As Eligible Health Professional

NCBDE has added **Master Certified Health Education Specialist (MCHES)** to the list of health professionals who may qualify for initial CDE certification.

## Volunteer Hours Now Accepted

NCBDE will now allow all **volunteer hours** of diabetes self-management education (DSME) provided by the applicant to be counted toward the hours required as the initial certification practice requirement.

## Unique Qualifications Pathway Established

NCBDE launched an alternative pathway for eligibility to become a Certified Diabetes Educator (CDE) known as the **Unique Qualifications Pathway**. This pathway will be for individuals providing diabetes education that do not qualify under the current list of health professionals applying for initial certification. This pathway is designed for health professionals holding an advanced degree in a health-related area / concentration from a United States college or university that is accredited by a nationally recognized regional accrediting body to pursue certification. This pathway has different eligibility requirements and involves a “pre-application” process. The information and application for the **Unique Qualifications Pathway** is available on the NCBDE web site. Individuals approved through this pathway can begin to take the Examination beginning in 2014.

For complete information, visit:



<http://www.ncbde.org/>

# NATIONAL CERTIFICATION BOARD FOR DIABETES EDUCATORS (NCBDE): *MODEL DIABETES EDUCATOR PRACTICE ACT*

The National Certification Board for Diabetes Educators (NCBDE) recently updated their Statement on Licensure of Diabetes Educators. In their Spring / Summer 2014 newsletter, NCBDE noted that in light of the debate within the diabetes educator community about the merits of licensure, NCBDE believes that any law should clearly mandate certain requirements for licensure.

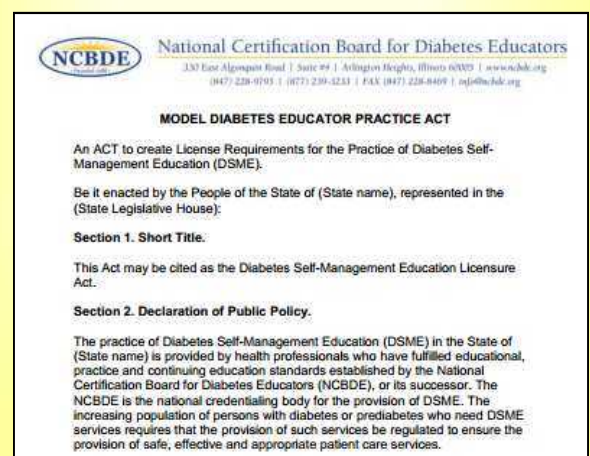
NCBDE approved their **Model Diabetes Educator Licensure Act** that outlines suggested licensure requirements.

This **Model Bill** is intended to:

- Protect the integrity of the specialty of Diabetes Self-Management Education (DSME) and support
- Protect the public from practitioners that are inadequately educated; poorly trained, and who have not demonstrated the competency to provide DSME by passing a psychometrically valid examination.

Visit the NCBDE website to review the model legislation at:

<http://www.ncbde.org/model-diabetes-educator-licensure-act-updated/>



# ADA DIABETES ADVOCACY VICTORIES

*Taken in part from Email: Larry Hausner, MBA, American Diabetes Association (ADA) Chief Executive Officer*

In the past few months, the American Diabetes Association (ADA) has had some exciting accomplishments in the Advocacy arena. The first three months of 2014 have brought us some impressive wins related to federal funding for diabetes research and prevention programs:

- In January, Congress allocated an additional **\$137 million** in funding for diabetes research and programs at the Centers for Disease Control and Prevention (CDC) and the National Institutes of Health (NIH) **over the amount provided last year.**
- **\$76 million** of this additional funding represents a 125% increase to the Division of Diabetes Translation at the CDC; **\$10 million** is for the National Diabetes Prevention Program run through CDC; and **\$51 million** is additional funding for the National Institute of Diabetes and Digestive and Kidney Diseases at NIH.

We were pleased to hear directly from staff involved in making the decisions that the 125% increase to diabetes funding at the CDC was the result of bipartisan agreement that diabetes was the best place to allocate the money – a direct result of the Association's leadership efforts in this area. Here are some other exciting wins for people with diabetes:

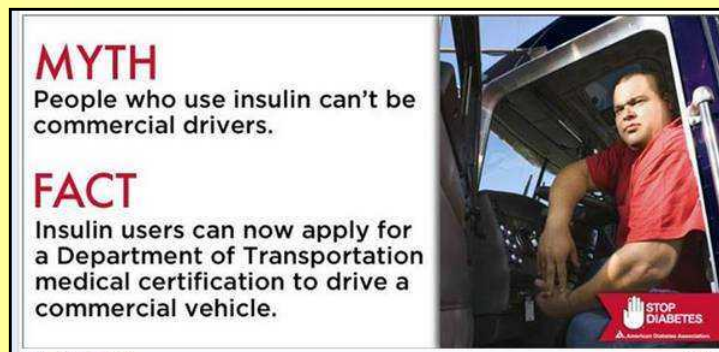
- The NIH announced the **Accelerating Medicines Partnership** led by NIH Director, Francis Collins. This is a partnership between a number of organizations including the NIH, the American Diabetes Association, the Alzheimer's Association and several private partners, including the pharmaceutical industry. The partnership will invest **\$58.5 million** into diabetes research related to new therapies over the next five years.
- The reauthorization of the Special Diabetes Program will result in an additional **\$300 million** for type 1 diabetes research at NIH and diabetes programs in American Indian and Alaskan Native communities.

We've also had some excellent progress with our **Safe at School** campaign:

- Legislation protecting children with diabetes at school passed and has been signed into law in **Kentucky** and Tennessee. These states now meet all three major tenets of our safe at school campaign: access to insulin, access to glucagon, and allowing students who are able to do so to self-manage their diabetes.
- Similar legislation passed in Alabama and is awaiting the governor's signature.
- The Nevada Board of Nursing approved guidelines allowing trained school employees to assist students with insulin administration (in addition to glucagon, which was already allowed).
- Major progress is happening in other states including Ohio and Idaho.

# ADA WORKS TO GET THE WORD OUT ABOUT DIABETES DISCRIMINATION

*Submitted by: Katharine Gordon, Director, Legal Advocate Program, American Diabetes Association, 1701 North Beauregard Street Alexandria, VA 22311, Tel: (800) 676-4065 ext. 1321, [kgordon@diabetes.org](mailto:kgordon@diabetes.org)*



**MYTH**  
People who use insulin can't be commercial drivers.

**FACT**  
Insulin users can now apply for a Department of Transportation medical certification to drive a commercial vehicle.

The American Diabetes Association (ADA) is working to get the word out about diabetes discrimination. More than 2,000 people with diabetes who use insulin have received medical certification from the Department of Transportation. Find out more about diabetes and commercial driving at [www.diabetes.org/cdl](http://www.diabetes.org/cdl).

ADA's legal advocates are available to help people with diabetes get fair treatment in all areas of daily life including at work, school, child care, government programs, public places, jails and prisons.

**As a health care professional, help your patients navigate commercial driving laws and regulations, or other workplace issues, by referring them to:**  
[www.diabetes.org/patientrights](http://www.diabetes.org/patientrights).

**If your patient who has diabetes has questions about their rights on the job, ADA can help them free of charge. Check out [www.diabetes.org/gethelp](http://www.diabetes.org/gethelp) or call 1-800-DIABETES.**



**MYTH** You have to disclose your diabetes when you apply for jobs.

**FACT** Employers may not ask about medical conditions until they have offered you a job.



# CHANGING TIMES FOR PRESCRIPTION HELP



Suzanne Craig

*Submitted by: Suzanne Craig, Community Access Project (CAP) Program Manager, Green River District Health Department*

Many people may not know that there are over 5,000 individual prescriptions that people can get for free through pharmaceutical companies. In the past, only people who were low income and uninsured

could gain access to these important medications. However, with the changes in the **Affordable Care Act**, **many pharmaceutical companies have changed their guidelines to include people who have insurance and are still low income.**

Pfizer, one of the world's largest pharmaceutical companies, took the lead to expand their help and reach to uninsured and underinsured individuals. Now many other pharmaceutical companies are slowly following suit.

A professional can gain access to all the medications being offered for free or reduced cost by going on the NeedyMeds website, [www.needymeds.org](http://www.needymeds.org) for an up-to-date list of medications and current applications. In some areas of the state, case managers from non-profit agencies and medical provider offices will also help with the prescription applications. This is a service that Green River District Health Department is proud to provide in our seven county district.



*Free or reduced cost up-to-date listing of medications and applications may be found on the NeedyMeds website:*

**[www.needymeds.org](http://www.needymeds.org)**

# NEW “*SAVING MONEY ON MEDICINE*” HANDOUT

Learning About Diabetes, Inc., recently replaced their **Patient Assistance Programs** handout with a newer version titled, ***Saving Money on Medicine.***

The new handout includes:

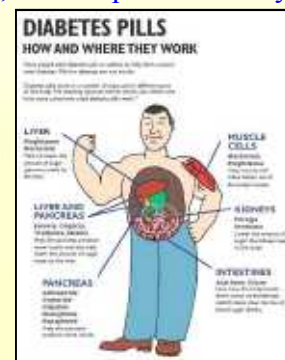
- information on the diabetes patient assistance programs offered by major pharmaceutical companies, and
- a new section on generic diabetes medications and where to purchase them.

The emphasis in the new handout is generic diabetes drugs. Some pharmaceutical companies continue to offer patient assistance programs for their diabetes medications after they become generic — but the prices offered by nationwide pharmacy networks and national chain stores are invariably lower and the simple process of filling a generic prescription may be quicker and easier.

Visit [www.learningaboutdiabetes.org](http://www.learningaboutdiabetes.org) to see the new handout in the ***Saving Money*** section.



Learning about Diabetes, Inc., has also posted a redesigned and updated version of the popular handout, ***Diabetes Pills — How and Where They Work*** (see below). A new companion handout, ***Medicines You Inject — How and Where They Work***, will be posted in July.



# TRADE 30TH ANNUAL WORKSHOP SUCCESSFUL!

*Submitted by: Kelly Dawes, Tri State Association of Diabetes Educators (TRADE) Local Networking Group Leader*

TRADE celebrated its 30<sup>th</sup> Annual Workshop on May 16, 2014 at the Henderson Community College, Fine Arts Center in Henderson, Kentucky.

In special recognition of TRADE's 30 years — we had a special acknowledgment for Deborah (Deb) Fillman MS, RD, LD, CDE in recognition and gratitude for her years of dedicated service to the American Association of Diabetes Educators (AADE) and the Tri State Association of Diabetes Educators (TRADE). TRADE presented a plaque to Deb who not only helped lead us locally by being a TRADE President, but also was **National AADE President** and continues to lead us as part of the AADE Board of Directors!



TRADE Workshop 2014 Committee Members left to right: Kelly Dawes, Teresia Huddleston, Ann Ingle (back), Janice Haile, Ann Motycka, Karen Fleck, Karen Hill, Grace Hert, Janet Meyer, and Deborah Fillman

Eighty-two participants attended the workshop which included topics: *KY and IN Health Information Exchanges/Kynect/Kynector Systems* by Polly Mullins-Bentley, RN RHIT CPHQ, Keith Kelley MBA, Miriam Fordham, PhD; *Management of High Risk Pregnancies Associated with Diabetes* by Dr. Thomas Tabb; *Monogenic and Idiopathic Diabetes: Diagnosis and Management* by Dr. Juan Sanchez; *Stages of Change, Motivational Interviewing, and Empowerment Tips for Behavior Change* by Dr. Libby Brown and our very own Janey Wendschlag, RN BSN and Janice Haile, RN BSN CDE discussing *Generational Styles of Learning: Tips for Teaching the AADE 7 Self-Care Behaviors* and *Urgency of Addressing Prediabetes: Become a CDC Recognized Diabetes Prevention Program (DPP)*, respectively.

Numerous vendors including our corporate sponsors **Lilly and Sanofi** were also available and provided helpful information regarding diabetes products.



Eighty-two health professionals attended the TRADE Workshop 2014 held at Henderson Community College on May 16th

## FED UP DOCUMENTARY NOW SHOWING



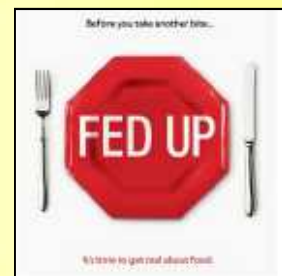
Michael Jacobson, PhD

*Submitted by: Michael F. Jacobson, PhD, Center for Science and Public Information Founder and Executive Director*

Every once in a few years, a documentary about food captures the public's imagination and inspires people to make changes in their lives and in our food environment. The latest of these is **Fed Up**, a film about the food industry's contribution to obesity that was produced by Laurie David (Inconvenient Truth) and narrated by Katie Couric, which was released in theaters on May 9.

**Watch the trailer:** <https://www.youtube.com/watch?v=aCubvOwwfWM>

**View theater sites:** <http://fedupmovie.com/#!/page/see-the-film?scrollTo=sales>





# FIRST ANNUAL *JANICE SHROYER MEMORIAL* *SCHOLARSHIP* AWARDED TO MITCHELL GOLDEN

*Submitted by: Mona Huff, Henry County Community Organizer, KIPDA Rural Diabetes Coalition*

A standing ovation and touching tribute was very fitting as the first-ever ***Janice Shroyer Memorial Scholarship*** was awarded to Mitchell Golden, a young man with Type 1 diabetes who will soon be working to complete his college degree.

The ***Scholarship*** was established in memory of Janice Shroyer, a nurse and diabetes educator, who was remembered for giving incredible encouragement and inspiration to those she served and in working to try to make a difference in our world.

In the presentation of the award, it was noted that Janice graduated from the University of Alabama in 1987 with a degree in nursing and quickly found her passion in diabetes as a diabetes educator. Janice spent the majority of her career learning all she could about diabetes and serving folks living with diabetes. She had an incredible love and compassion for people with diabetes.

When Janice left work due to her illness, she volunteered with the local diabetes group as soon as her health allowed and as long as she could before her cancer returned. She started a local diabetes support group and helped plan the first annual tri-county challenge walk and second educational day.

In memory of this very special lady, Mitchell Golden was chosen to receive this first – ever scholarship because he has demonstrated that even if you have a chronic disease such as diabetes, you can keep on keeping on.

In Mitchell's application he noted, "The diagnosis of diabetes impacted everything in my life, but has not kept me from doing anything."

Mitchell has been a mentor in school, active in his church, served as a camp counselor for a special needs student, worked with the junior league basketball camp, and

performed additional community service including working with the Youth Coalition. Mitchell also played sports and maintained a high grade point average.



*Mitchell Golden, pictured in center above, was awarded the first annual Janice Shroyer Memorial Scholarship Award. Also pictured above are Mona Huff, left, and Tom Shroyer, right.*

One advocate for this young man said, *"It is rare to meet a high school student who is so mature, compassionate and is a natural-born leader. I can wholeheartedly support Mitchell for this award as he has demonstrated great leadership and vision to make a positive impact on our school and community."*

NOTE: The ***Janice Shroyer Memorial Scholarship***, a \$500 scholarship award for a student at Eminence Independent School who aspires to make a difference in our world, was established by Tom Shroyer, Janice Shroyer's husband, and the Henry County Diabetes Coalition. Tom Shroyer, who was married to Janice Shroyer for 25 Years, is the former Mayor of Eminence and serves presently as a council member.

For information regarding the scholarship award or how to apply in the future contact:

Mona Huff  
Henry County Community Organizer  
Home: (502) 845-6849  
Cell: (502) 706-0098  
Monahuff.henrykipda@gmail.com



KIPDA Rural Diabetes Coalition  
*Diabetes has no boundaries*

*Taken in part from JDRF Mission Messages Special Edition*

**Exciting developments! The Juvenile Diabetes Research Foundation (JDRF) recently released their top ten research advances listed below:**

## PORTFOLIO T1D = Type 1 Diabetes

### Broadening Type 1 Diabetes Research Funding Sources

- Enhancing research across the JDRF portfolio of programs
- Special Diabetes Program renewed (\$150M) with JDRF Advocacy efforts
- New translational partnership with Pfizer Centers for Therapeutic Innovation
- Formation of T1D Innovations to create T1D focused companies

## ENCAPSULATION

### Progress on ViaCyte's Novel Encapsulated Cell Therapy

- Rapidly approaching key milestone with start of first human test this year
- Product made possible by previous JDRF-funded stem cell research
- JDRF support of ViaCyte is accelerating development progress of this innovative product

## RESTORATION

### Potential Drugs for Beta Cell Regeneration Discovered

- JDRF partnership with Genomics Institute of the Novartis Research Foundation discovers potential disease altering therapies
- Novel drugs found that stimulate beta cell proliferation in lab
- Presence of residual beta cells originally discovered in JDRF-funded Medalist study get new confirmation

### Drug for Reducing Beta Cell Stress Shows Promise in Halting Type 1 Diabetes in Animals

- JDRF-funded study breaks new ground focused on boosting beta cell performance by reducing cell stress
- Shows that beta cell preservation is possible even in the face of T1D immune attack
- Drug could move quickly into human study in T1D

## COMPLICATIONS

### Hope for Type 1 Diabetes Kidney Health in Gout Drug

- Kidney complications affect one-third of people living with T1D
- JDRF funded a feasibility study of allopurinol in those with T1D and early signs of kidney damage
- SDP is now funding larger study that could lead to a therapy to

slow or stop kidney failure in T1D

## ARTIFICIAL PANCREAS

### Accelerating Development Progress of Artificial Pancreas Systems

- FDA approves low glucose suspend product
- Predictive low glucose systems proven valuable in at-home setting; product under review in Europe
- Unsupervised overnight system use improves control and quality of life
- Multi-center, at-home treat-to-range study nearing start

### Inhaled Insulin Shows Value in Artificial Pancreas Study

- Early artificial pancreas systems will require bolus insulin dosing to cover mealtime needs
- Combining a partially automated system with a rapid acting insulin at meals provides a near-term solution based on JDRF-funded study
- FDA committee recently voted in favor of inhaled insulin (Afrezza)

## SMART INSULIN

### Merck Smart Insulin Project Advancing into Clinical Trials

- Merck plans to begin human testing of groundbreaking project – a major milestone
- Technology originally developed at SmartCells with key financial and technical support from JDRF
- NIH Special Diabetes Program also provided early funding—another example of JDRF advocacy impact

## PREVENTION

### Redefining an Earlier Diagnosis of Type 1 Diabetes

- Autoantibody markers of T1D can predict future insulin dependence with a high degree of certainty based on JDRF-funded research
- Waiting for insulin dependence misses opportunities for potential therapies to delay or slow T1D progress
- JDRF leadership is creating consensus around redefining T1D

### Progress on Causes of Type 1 Diabetes Provides Path to Potential Prevention Strategies

- JDRF research is helping narrow the focus of key factors causing T1D to guide development of potential prevention therapies
- Bacterial interactions within the gut may influence T1D – building on the microbiome theory
- JDRF-funded study links specific virus to T1D



# FDA APPROVES NEW HIGH-INTENSITY SWEETENER ADVANTAME



**U.S. Food and Drug Administration**  
Protecting and Promoting *Your Health*

*Taken in part from the FDA Website: <http://www.fda.gov/Food/NewsEvents/ConstituentUpdates/ucm397740.htm>*

The Food and Drug Administration (FDA) announced May 19, 2014 that a new food additive, **Advantame**, is safe for use as a general-purpose sweetener and flavor enhancer in food, except meat and poultry. New food additives must be approved by the FDA before they may be marketed in the United States. **Advantame** is the 6<sup>th</sup> high-intensity sweetener approved by the FDA.

High-intensity sweeteners, such as **advantame**, may be used in place of sugar for a number of reasons, including that they do not contribute calories or only contribute a few calories to the diet. High-intensity sweeteners also generally will not raise blood sugar levels.

**Advantame** is a free-flowing, water soluble, white crystalline powder that is stable even at higher temperatures, and can be used as a tabletop sweetener as well as in cooking applications. **Advantame** has been approved for use as a general-purpose sweetener and flavor enhancer and can be used in baked goods, non-alcoholic beverages (including soft drinks), chewing gum, confections and frostings, frozen desserts, gelatins and puddings, jams and jellies, processed fruits and fruit juices, toppings, and syrups.

In evaluating the safety of **advantame** under the petitioned conditions of use, the FDA reviewed data from 37 animal and human studies. The safety studies were designed to identify possible toxic effects, such as reproductive, neurological, and cancer-causing effects. The FDA concluded after a thorough evaluation that **advantame** is safe for human consumption under the petitioned conditions of use.

Upon publication of the final rule, the food additive petition process includes a 30 day period to file objections. Objections can be submitted electronically to the FDA docket through **FDA-2009-F-0303**

**To submit objections by mail, send to FDA at:**

**Division of Dockets Management (HFA-305)**  
**Food and Drug Administration**  
**5630 Fishers Lane, Rm. 1061**  
**Rockville, MD 20852**

**All objections must include the agency name and docket number.**

## KY SOCIAL SERVICES OFFICES IMPLEMENTING NEW OFFICE PROCEDURES

*Taken in part from a Cabinet for Health and Family Services Press Release, Frankfort, KY, April, 2014*

The **Kentucky Department for Community Based Services (DCBS)** recently implemented new office procedures for walk-in customer “benefit interviews” at its family support offices.

DCBS is part of the Kentucky Cabinet for Health and Family Services that accepts applications for food benefits, Medicaid, and health insurance through kynect, the state’s health insurance marketplace.

The new office procedures will allow DCBS staff to process pending food benefit, Medicaid, and qualified health plan applications more quickly.

The new office procedures were tested in 28 counties with great success. The new change began Monday, April 21, 2014 at all county DCBS offices.

### **New office procedures include:**

- **Face-to-face interviews with DCBS staff will be available from 8 am to 2 pm.**
- **Customers who arrive at an office *by 2 pm* will be seen that day.**
- **Customers who arrive *after 2 pm* and request a “benefit interview” will be given instructions for completing their applications through alternative methods on the same day.**
- **Customers can obtain information, report a change, and leave paperwork -- such as verifications or information updates -- at DCBS offices at any time during regular office hours of 8 a.m. to 4:30 p.m.**

### **DCBS Customer Contact Information:**

- Customers applying for health care benefits through kynect can log on to <http://kynect.ky.gov> or call (855) 4kynect – (855) 459-6328 – or (855) 326-4654 (TTY).
- Customers seeking food benefits can initiate the application on-line at: <https://snapfoodbenefits.chfs.ky.gov> or call (855) 306-8959. A family support worker will contact the customer to complete the interview and eligibility determination.
- For help with other DCBS applications or annual benefit renewals, customers may call (855) 306-8959.

# HAVE YOU HEARD?

## National Diabetes Education Initiative (NDEI)

### *Latest Patient Education Resources*

The National Diabetes Education Initiative (NDEI) latest patient education resources include:

#### Insulin Drugs —

#### DPP 4 Inhibitors and GLP-1 Receptor Agonists.

- How they are taken
- How they work
- Benefits
- Possible side effects

Download them individually or as a companion set, along with NDEI's *Medications Used in Type 2 Diabetes* handout:

<http://www.ndei.org/patienteducation.aspx>

#### Coming Soon:

#### Understanding SGLT2 Inhibitors



## AADE WORKED WITH KDPCP TO HELP EXPAND DIABETES PREVENTION PROGRAMS IN KENTUCKY

The American Association of Diabetes Educators (AADE) worked with the Kentucky Diabetes Prevention and Control Program (KDPCP) to provide a free coaches training for the National Diabetes Prevention Program (NDPP) to increase the number of CDC Recognized DPP sites and coaches in KY. The training resulted in 5 new NDPP sites being established in Bowling Green, Hopkinsville, Lexington, Louisville and Owensboro as well as new coaches being trained for existing sites.



*A National Diabetes Prevention Program (NDPP) coaches training was held in Louisville at Baptist East Hospital on June 3rd and 4th. Participants pictured in photo on left.*



## “IT’S THE BEST DAY EVER!!”

### **HENDERSON COUNTY DIABETES ADVENTURE CAMP SUCCESSFUL**

*Submitted by Karen Hill, RD, LD, Henderson County Diabetes Coalition Secretary*

“*It’s the Best Day Ever!*” — is what one of the campers in the Henderson County Diabetes Coalition’s (HCDC) **Diabetes Adventure Camp** told his grandmother — and the day was only half way into the activities!

On Saturday, June 14th, HCDC sponsored our 6<sup>th</sup> Annual Diabetes Day Camp for children and teens between the ages of 5 and 15. There were educational programs for the adults and fun activities as well as education for the campers.

Six campers ranging in age from 9 to 15 along with 8 parents and grandparents attended. All of the campers were male leading one of the campers to comment that it was a “men’s day out”.

It was a great day for everyone — with lots of sharing of experiences and making new friends! As one of the parents said at the end of the day, “*It was a great day*” — and I don’t think anyone who participated would argue with that.



*Henderson County Diabetes Coalition (HCDC) Diabetes Adventure Camp participants hike and explore on a nature trail (photo above).*



*Diabetes Adventure Camp attendees play games at the diabetes day camp held June 14th in Henderson, KY (photo above).*

## ADAIR COUNTY MAKING BIG STEPS WITH COMMUNITY WALKING CLUB

The **Adair County WATCH Coalition** and its community partners have initiated a community walking club for Adair County residents. The walking club will utilize the county’s resources to promote physical activity. The walking club’s kick-off event was held Monday, May 12<sup>th</sup> with forty-three people participating! The kick-off walk was sponsored by the Adair County Health Department and Jones Chapel United Methodist Church.

Community walks will be held at least monthly at various locations with different community sponsors for each walk. Participants will track their physical activity and turn in their log sheets to receive incentives for goals met. Participants are also given the option to form teams to walk together or to walk as individuals.

A recent survey conducted in Adair County identified the need for free and safe physical activity places. The **Adair County WATCH Coalition** hopes the community walking club can serve as one solution to this problem.

Additionally, the **Adair County WATCH Coalition** obtained funding to purchase signs for the walking track at the Jim Blair Community Center. This location was identified by the aforementioned survey as the county’s most utilized free resource for physical activity. The signs are both educational and motivational.

Lake Cumberland District Health Department employees Destiny Greer, RN, CDE, Diabetes Educator, and Jelaine Harlow, Health Educator, serve as co-chair persons for the **Adair County WATCH Coalition**.



*Adair County WATCH Coalition and its community partners initiated a community walking club for Adair County residents (photo above).*

*The Coalition received funding to purchase signs for the walking track at the Jim Blair Community Center (photo on right).*





### AADE Webinars:

- 7-23-14** — Technology & Youth—Using tech to teach self-management
- 8-20-14** — Nutrition: Popular Supplements for Type 2 Diabetes: What you need to know
- 9-10-14** — Reimbursement in Diabetes Education
- 10-8-14** — Cardiovascular Disease and Diabetes
- 10-22-14** — Obesity Series, Part IV: Surgical Considerations

Reserve your place now, as seating is limited. Webinars take place from 1-2:30 Eastern and offer 1.5 hours CE credit, unless otherwise noted.

For a full list of offerings and to register visit:  
<https://www.diabeteseducator.org/ProfessionalResources/>



## SAVE THE DATE

### THE FRIEDEL COMMITTEE FOR HEALTH SYSTEM TRANSFORMATION

October 2014

# Oct. 26 & 27

The FRIEDEL COMMITTEE Annual Meeting will be held October 26-27, 2014. Location - TBA

KENTUCKY'S SHARED AGENDA FOR HEALTH --  
Healthier, Wealthier and Wiser

This meeting will be of interest to ALL persons and organizations that want to work together to make Kentucky a healthier state. That includes business, education, government, providers, non-profits and other Kentucky citizens. Our vision is that if we all work together we can create change.

We will take a dynamic look at the challenge, including a review of current initiatives and successes and future action steps.

For more information:  
<http://www.friedellcommittee.org/>

## DIABETES EDUCATION OFFERINGS

### The Latest Advances In DIABETES MANAGEMENT

### SAVE THE DATE!

**The Latest Advances in Diabetes Management  
October 24, 2014**

**Corbin Technology & Community Activities Center  
Corbin, Kentucky 40701**

This program will present the latest advances and recommendations in the management of diabetes through recognizing the risk factors for developing diabetes, reducing cardiovascular complications, nutrition management, pharmacological agents in diabetes care, with an emphasis on healthy lifestyle choices including physical activity.

**Look for a brochure coming out July 15th**

**For information, contact:  
Anna Jones, Southern KY AHEC, [ajones@soahec.org](mailto:ajones@soahec.org)**

### Kentucky Statewide Diabetes Symposium 2014

Friday, November 7, 2014  
Marriott East  
Louisville, KY

Mark your calendar



**Brochures will be sent in  
early September!**

Nurses, Dietitians, Pharmacists, and other  
Healthcare Professionals earn CEUs.  
Certified Diabetes Educators earn hours  
toward certification.

**Need more information about the program?**

Please contact:

Julie Shapiro RD, LD (859) 363-2116  
[julie.shapiro@kyhealthcare.org](mailto:julie.shapiro@kyhealthcare.org) or

Janice Haile, RN, CDE (270) 686-7747, ext. 3031  
[janice.haile@ky.gov](mailto:janice.haile@ky.gov)

Symposium is organized by Kentucky Local HealthCare Group of the American Association of Diabetes Educators (AADE)






## KADE DIABETES EDUCATOR MEETINGS SCHEDULED

The Kentucky Association of Diabetes Educators (KADE), (covers *Lexington and Central Kentucky*), meets quarterly (time & location vary). For a schedule or more information, go to <http://kadenet.org/> or contact: Dee Deakins [dee.deakins@uky.edu](mailto:dee.deakins@uky.edu) or Diane Ballard [dianeballard@windstream.net](mailto:dianeballard@windstream.net).

**Presentations from KADE's Spring Symposium  
"Navigating the Maze of Diabetes Care"**  
may be downloaded at:  
<http://kadenet.org/>



**Pre-order your copy of the  
NEW Art and Science of Diabetes Self-  
Management Education Desk Reference  
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Call AACE 1-800-338-3633**

## KENTUCKY DIABETES NETWORK (KDN) MEETINGS SCHEDULED

The Kentucky Diabetes Network (KDN) is a network of public and private providers striving to improve the treatment and outcomes for Kentuckians with diabetes, to promote early diagnosis, and ultimately to prevent the onset of diabetes.

Anyone interested in improving diabetes outcomes in Kentucky may join. Membership is free. A membership form may be obtained at [www.kentuckydiabetes.net](http://www.kentuckydiabetes.net) or by calling 502-564-7996 (ask for diabetes program).

**2014 KDN Meeting Dates (10 am—3 pm EST)  
September 12, 2014**

University of Louisville, Shelby Campus, Louisville, KY  
**December 5, 2014**  
KY History Center, Frankfort, KY

## GLADE DIABETES EDUCATOR MEETINGS SCHEDULED

The Greater Louisville Association of Diabetes Educators (GLADE), (covers *Louisville and the surrounding area*), meets the second Tuesday every other month. Registration required. For a meeting schedule or to register, contact Vanessa Paddy at 270-706-5071 [Vpaddy@hnh.net](mailto:Vpaddy@hnh.net) or Anne Ries at 502-852-0253 [anne.ries@louisville.edu](mailto:anne.ries@louisville.edu)

## DECA DIABETES EDUCATOR MEETINGS SCHEDULED

Diabetes Educators of the Cincinnati Area (DECA) (covers *Northern Kentucky*) invites anyone interested in diabetes to our programs. Please contact Susan Roszel at [susan\\_roszel@trihealth.com](mailto:susan_roszel@trihealth.com) 513-977-8942. Meetings are held in Cincinnati four times per year at the Good Samaritan Conference Center unless otherwise noted.

**Registration 5:30 PM — Speaker 6 PM  
1 Contact Hour**  
*Fee for attendees who are not members of  
National AADE*

## TRADE DIABETES EDUCATOR MEETINGS SCHEDULED

The Tri-State Association of Diabetes Educators (TRADE), (covers *Western KY/Southern IN/Southeastern IL*) meets quarterly from 10 am – 2:15 pm CST with complimentary lunch and continuing education. To register, call Janice Haile at 270-686-7747 extension 3031 or email [janice.haile@ky.gov](mailto:janice.haile@ky.gov).

**July 17, 2014—TRADE Quarterly Program**  
Pregnancy and the Woman with Diabetes (First Hour)  
Janice Thurmond, MSN, APRN  
Smoking Cessation Including E-Cigarettes (Second Hour)  
Bobbie Gray, RN, BSN  
Murray Calloway County Hospital Center for Health and Wellness  
Murray, KY

**October 16, 2014—TRADE Quarterly Program**  
Details To Be Announced  
Deaconess Gateway Hospital, Newburgh, IN

**January 2015—TRADE Quarterly Program**  
Details To Be Announced  
Owensboro Health, Owensboro, KY

## ENDOCRINOLOGISTS MEETINGS SCHEDULED

The Ohio River Regional Chapter of the American Association of Clinical Endocrinologists (AACE) and the Kentuckiana Endocrine Club (KEC) meet on a regular basis. For a schedule of meetings, contact Vasti Broadstone, MD, phone 812-949-5700 email [joslin@FMHHS.com](mailto:joslin@FMHHS.com).

**Learn About CDC's National Diabetes Prevention Program**  
<http://www.cdc.gov/diabetes/prevention/about.htm>

# Kentucky Diabetes Connection



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## NEED A KY DIABETES RESOURCE?

Kentucky Diabetes Resource Directory  
*Update your entry information*

<https://prd.chfs.ky.gov/KYDiabetesResources>

## Contact Information

**American Diabetes Association**  
Cure • Care • Commitment®  
[www.diabetes.org](http://www.diabetes.org)  
1-888-DIABETES

**KENTUCKY ASSOCIATION of DIABETES EDUCATORS**  
**KADE**  
Local Networking Group of AADE  
A LOCAL NETWORKING GROUP of the  
**AADE** American Association of Diabetes Educators  
[www.kadenet.org](http://www.kadenet.org)

**JDRF** IMPROVING LIVES. CURING TYPE 1 DIABETES.  
[www.jdrf.org/chapters/KY/Kentuckiana](http://www.jdrf.org/chapters/KY/Kentuckiana)  
1-866-485-9397

**TRADE**  
Tri-State Association of Diabetes Educators  
A LOCAL NETWORKING GROUP of the  
**AADE** American Association of Diabetes Educators

**GLADE**  
Greater Louisville Association of Diabetes Educators  
A LOCAL NETWORKING GROUP of the  
**AADE** American Association of Diabetes Educators  
[www.louisvillediababetes.org](http://www.louisvillediababetes.org)

**DE CINCINNATI**  
Diabetes Educators Cincinnati Area  
A LOCAL NETWORKING GROUP of the  
**AADE** American Association of Diabetes Educators

**KDN**  
KENTUCKY DIABETES NETWORK, INC.  
[www.kentuckydiabetes.net](http://www.kentuckydiabetes.net)

**KENTUCKY DIABETES PREVENTION AND CONTROL PROGRAM**  
**KDCPP**  
**Kentucky**  
UNBROKEN SUPPORT  
<http://chfs.ky.gov/dph/info/dpqi/cd/diabetes.htm>

**AAACE**  
American Association of Clinical Endocrinologists  
Ohio River Regional Chapter  
[joslin@fmhhs.com](mailto:joslin@fmhhs.com)  
**Kentuckiana Endocrine Club**  
[Joslin@EMHHS.com](mailto:Joslin@EMHHS.com)

NOTE: Editor reserves the right to edit for space, clarity, and accuracy.